

| POSITION | ID NO. | DATE |
|-------------|--------|---------|
| CLASSIFIER | | |
| EXAMINER | 455 | 1/13/95 |
| TYPIST | 566 | 1/17/96 |
| VERIFIER | | |
| CORPS CORR. | | |
| SPEC. HAND | 119 | 5/13/95 |
| FILE MAINT. | 401 | |
| DRAFTING | | |

Related
Case
303561

INDEX OF CLAIMS

NOTE:
Review 109-129
to determine whether part
of group I.

| Claim | Final | Original | Date |
|-------|-------|----------|------|
| 1 | | 2 11 97 | |
| 2 | | 5 21 97 | |
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| Claim | Final | Original | Date |
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| Claim | Final | Original | Date |
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SYMBOLS

- ✓ Rejected
- Allowed
- (Through numeral) Canceled
- + Restricted
- N Non-elected
- I Interference
- A Appeal
- O Objected

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---------------------|----------|--------|----------|
| FEE DETERMINATION | HA | 386 | 6/8 |
| O.I.P.E. CLASSIFIER | ECAD | 59227 | 12/27/97 |
| FORMALITY REVIEW | OS | | 1/11/99 |

INDEX OF CLAIMS

✓ Rejected
 = Allowed
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| Claim | Date |
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| Claim | Date |
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If more than 150 claims or 10 actions
staple additional sheet here

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| POSITION | INITIALS | ID. NO. | DATE |
|---------------------|----------|---------|------|
| FEE DETERMINATION | | | |
| O.L.P.E. CLASSIFIER | | | |
| FORMALITY REVIEW | | | |

INDEX OF CLAIMS

- ☒ Rejected
☐ Allowed
☐ (Through numeral) Canceled
☐ Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

112, 1st.
 108
 77-81 (103)
 (113) (114) (123)

| Claim | Final | Original | Date |
|-------|-------|----------|------|
| 1 | ✓ | 7300 | |
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| Claim | Final | Original | Date |
|-------|-------|----------|------|
| 51 | N | 7300 | |
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| Claim | Final | Original | Date |
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If more than 150 claims or 10 actions
staple additional sheet here